

6ER-022H02-CORTICOSTEROIDS FOR SYSTEMIC USE



CLINICAL IMPACT OF THE USE OF GLUCOCORTICOIDS FOR THE TREATMENT OF COVID-19 IN INTERMEDIATE RESPIRATORY CARE UNITS

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BACKGROUND AND IMPORTANCE

During the pandemic, patients admitted to intermediate respiratory care units (IRCU) received non-invasive respiratory support and pharmacological treatment, mainly glucocorticoids (GC). However, there are no comparative efficacy studies between the different GCs.

AIM AND OBJECTIVES

To determine the possible influence of the type and dose of GC on the patients evolution with SARS-CoV-2 pneumonia admitted to the IRCU during the first and second wave of the pandemic.

MATERIALS AND METHODS

- Descriptive, observational and retrospective study
- Inclusion criteria: patients with SARS-CoV-2 infection admitted to the IRCU since March until December 2020.
- The data were obtained from the clinical history and the electronic prescription.

RESULTS

- 135 patients
- 62,5%
- Mean age: 67.00 (SD 14.8)



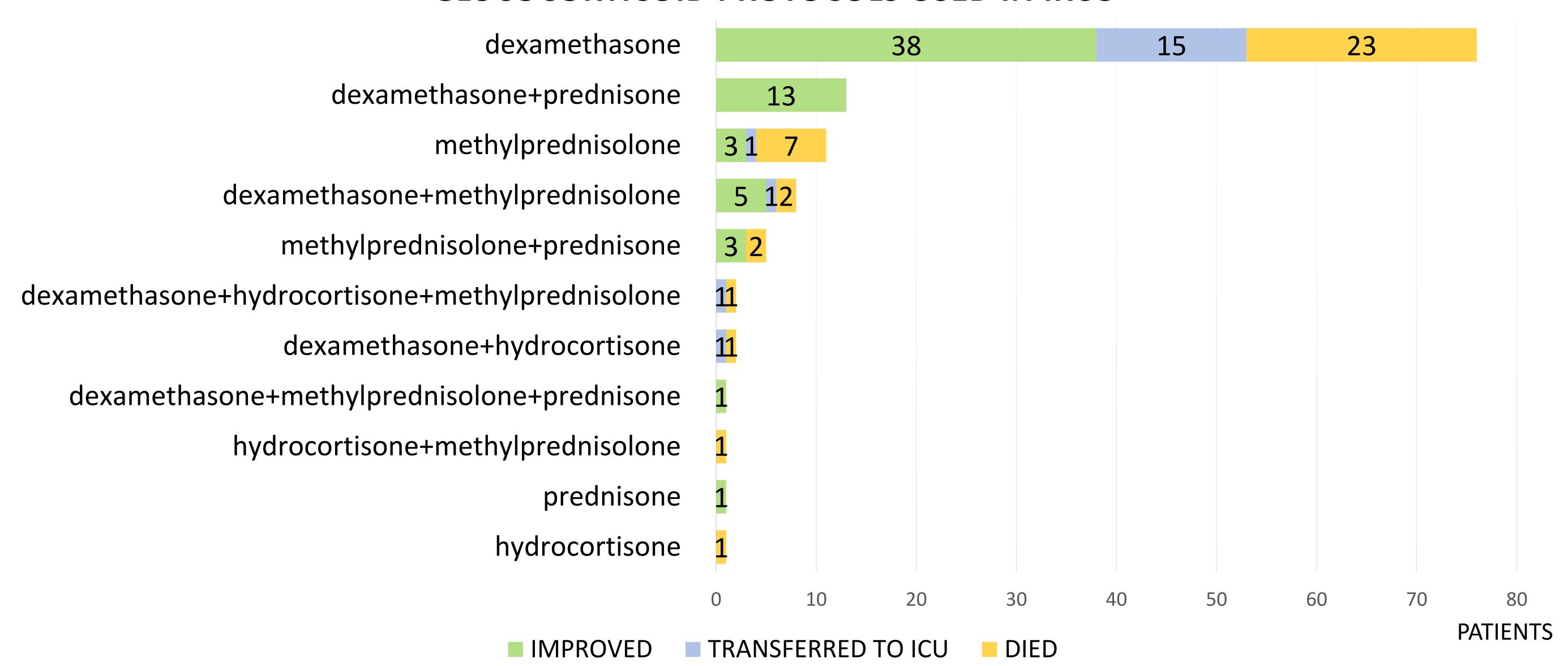
	equivalent dose	treatment with GC
IMPROVED (n=64)	65.43 mg (SD:88.77)	13.40 days (SD:7.02)
TRANSFERRED TO ICU (n=19)	89.18 mg (SD:71.81)	6,00 days (SD:5.19)
DIED (n=38)	114.18 mg (SD:90.39)	8.92 days (SD:6.17)

Mean prednisone

Mean days in

89.63% of the patients received treatment with GC

GLUCOCORTICOID PROTOCOLS USED IN IRCU



CONCLUSIONS AND RELEVANCE

Most of the patients admitted to the IRCU with coronavirus received GC and the results suggest some improvement in those who received lower doses of GC for longer periods.

The GC combination was associated with a higher rate of improvement, especially with dexamethasone and prednisone. Treatment with methylprednisolone alone had the highest death rate.